Harnessing core public health functions to improve maternal and child health.

NEEDS ASSESSMENT
Assessing the current state and needs of women and children.

PROGRAM DEVELOPMENT
Developing and implementing programs to improve maternal and child health.

EVALUATION
Evaluating performance to assure positive change throughout the life course.

Why? Because early life events shape an individual’s future health.

NEEDS ASSESSMENT
Healthy Texas Babies Data Book
https://www.dshs.texas.gov/healthytexasbabies/data.aspx

This annual report uses statistics and maps to feature important trends in infant and maternal health and where interventions are needed for improvement. Outcomes examined include infant mortality, preterm birth, and low birth weight, with a focus on racial/ethnic disparities and where and when prevention efforts are most critical. Smoking, pre-pregnancy obesity, and diabetes and hypertension are also included to show the risks that these factors pose to infant health. Trends in low risk labor inductions and cesareans are also presented. Positive infant health practices are also featured to highlight trends in breastfeeding and placing infants on their back to sleep. The good news is that infant mortality in Texas continues to trend lower than the national average and the Healthy People 2020 target. However, the infant mortality rate for African American women is more than twice as high as it is for white and Hispanic women. The data book serves as the foundation from which all infant health programming is developed and implemented.

Pregnancy Risk Assessment Monitoring System (PRAMS)
https://www.dshs.texas.gov/mch/PRAMS.aspx

Conducted in partnership with the Centers for Disease Control and Prevention, PRAMS is a survey designed to monitor the attitudes and behaviors of recent mothers before, during, and after pregnancy. Questions assess both risk factors (e.g., smoking, consuming alcohol, physical abuse) and protective factors (e.g., vitamin usage, accessing prenatal care, breastfeeding) for maternal health. An annual PRAMS data file, tables, and summary are published and are available for public use, as are dashboards and factsheets on issues of concern, such as pre-pregnancy obesity and the importance of oral health care before and during pregnancy. Analysis of PRAMS data drives all maternal health programming so that women have healthier pregnancies.
Aimed at improving infant health, Healthy Texas Babies increases awareness of disparities in infant mortality, preterm birth, and associated maternal risk factors. A key program component is Someday Starts Now, designed to improve preconception health, and ultimately, birth outcomes. Someday Starts Now websites deliver public health messaging and tools in English and Spanish to women, men, providers, and organizations working with families. Equally important is the Texas Collaborative for Healthy Mothers and Babies, charged with advancing health care quality and patient safety for Texas mothers and babies by promoting best-practices and education and training. There is also a Preconception Peer Education component to reduce infant mortality in the African American community.

In coordination with the national Office of Minority Health, young women and men at historically Black colleges are trained to educate their peers and members of their community on the importance of preconception health, seeking regular preventive care, and family planning.

Zika Planning & Outreach
http://www.texaszika.org/

Best-practice guidance and plans are developed to evaluate and manage infants with possible congenital Zika virus infection. Efforts involving parent and health care provider outreach and education are also underway, as is training of Community Health Workers along the Texas-Mexico border.

Breastfeeding
http://texasmotherfriendly.org/about-the-program; http://texastenstep.org/

Multiple initiatives have been developed to increase support for breastfeeding. In fact, 2,485 worksites are now designated as a Texas Mother Friendly Worksite by providing mothers the privacy and flexibility needed to express and store breastmilk at work. And 78 percent of Texas births occur in birthing facilities participating in the Texas Ten Step or Baby-Friendly Hospital initiative, each aimed at increasing and supporting the practice of breastfeeding.

Collaboration

Program development and implementation are enhanced through collaboration with many national and state agencies and organizations — all aimed at improving the health of women, children, and families.

EVALUATION

Title V Maternal & Child Health Block Grant
https://www.dshs.texas.gov/mch/TitleVMCHBlockGrant.shtm

Partnering with the Health Resources and Services Administration assures that we evaluate program performance for improving maternal and child health.